-Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number

5552550/2303

CLAIMS AS FILED - (Column								SMALL ENTITY		OTHER THAN			
TOTAL CLAIMS			(Coldinary 1)			11112		RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBI	ER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS					•			\			V040		
_	· · · · · · · · · · · · · · · · · · ·		6 minus 20=		•			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			2 minus 3 =					X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=	-	OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	740	
/-/3-05 claims as amended - part ii								<u> </u>			OTHER THAN		
· ·		(Column 1)	(Colu		mn 2) (Column 3)		SMALL				SMALL		
AMENDMENT A	į	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 10	Minus	-2	0	=		X\$ 9=		OB.	X\$18=	,	
	Independent	· 3	Minus	***	3	=		X42=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140= 4			+280=		
TOTAL													
							_	ADDIT. FEE	<u></u>	OR	ADDIT. FEE		
	· · · · · · · · · · · · · · · · · · ·	(Column 1)	i 		imn 2) Hest	(Column 3	1		ADDI-	a .		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
Z C S	Total	•	Minus	**		=		X\$ 9=	•	OR	X\$18=		
E E	Independent	*	Minus	***		=	4	X42=	· .	OR	X84=	·	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							140					
								+140=		OR	TOTAL		
								TOTAL ADDIT. FEE		OR	ADDIT. FEE		
	 	(Column 1)			ımn 2)	(Column 3	<u>)</u>			_			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NU! PREV	HEST MBER 10USLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		E		X\$ 9=		OR	X\$18=		
BE	Independent	tr .	Minus	***		5		X42=			X84=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	-		
A Mile and a second and a second and a second as a													
* If the entry in column 1 is less than the entry in column 2, write "U" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** ADDIT. FEE ****If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											ADDIT. FEE		
	Th "Highest Nur	mb ir Previously Pa	uid For (Total o	r Indepen	ident) is th	e highest num	ber f	ound in the ap	propriate bo	ox in c	olumn 1.	•	